

SUBSTITUTE DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (37 CFR 1.63)		Attorney Docket Number	42P21119
		First Named Inventor	Suresh Nagarajan
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		COMPLETE IF KNOWN	
		Application Number	10/591,933
		Filing Date	September 6, 2006
		Art Unit	2185
		Examiner Name	SAVLA, ARPAN P

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below, next to my name.

I believe I am the original and first inventor (if only one name is listed below) or an original and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**USING TRANSACTED WRITES AND CACHING MECHANISM TO IMPROVE WRITE
PERFORMANCE IN MULTI-LEVEL CELL FLASH MEMORY BACKGROUND**

(Title of the Invention)

the specification of which

☐ Is attached hereto.

OR

☒ was filed on (if applicable):

or 09/06/2006 as United States Application Number 10/591,933

and was amended on _____ as PCT International Application Number _____ (if applicable)

I hereby authorize and request my attorney, associated with Customer Number 45209, to insert on the designated lines above, the filing date, application number, PCT International Application Number and amendment date, as applicable, of the patent application should this Declaration be filed after filing the specification.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
PCT/CN2006/000852	CN	06/16/2006	<input type="checkbox"/>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Appointment of Practitioners:

I hereby appoint the practitioners associated with Customer Number: 45209
as my/our attorney(s) or agents(s), with full power of substitution and revocation, to prosecute this
application and to transact all business in the U.S. Patent and Trademark Office connected herewith.

Correspondence:

Direct all correspondence to Customer Number 45209.

I hereby declare that all statements made herein of my own knowledge are true and that all
statements made on information and belief are believed to be true; and further that these
statements were made with the knowledge that willful false statements and the like so made are
punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false
statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Suresh Nagarajan
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])
Inventor's Signature [Signature] Date 10/28/09
Residence Mather, California United States Citizenship India
(City, State, Country) (Country)
Mailing Address 4320 Grafton Circle
Mather, California 95655 United States

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Hongyu Wang
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])
Inventor's Signature _____ Date _____
Residence Shanghai, China Citizenship China
(City, State, Country) (Country)
Mailing Address Room 301, No. 8, Lane 158, Minhang District
Shanghai, 201100 China

NAME OF THIRD INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])
Inventor's Signature _____ Date _____
Residence _____ Citizenship _____
(City, State, Country) (Country)
Mailing Address _____

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			<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Appointment of Practitioners:

I hereby appoint the practitioners associated with Customer Number: 45209
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statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Suresh Nagarajan
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence Mather, California United States Citizenship India
(City, State, Country) *(Country)*

Mailing Address 4320 Grafton Circle
Mather, California 95655 United States

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: Hongyu Wang
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature  Date 2009/10/26

Residence Shanghai, China Citizenship China
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NAME OF THIRD INVENTOR: ☐ A petition has been filed for this undersigned inventor

Full Name: _____
(First, Middle [if any], Family Name (or Surname), and Suffix [if any])

Inventor's Signature _____ Date _____

Residence _____ Citizenship _____
(City, State, Country) *(Country)*

Mailing Address _____
